SERFF Tracking Number: THRV-126317653 State: Arkansas
Filing Company: Thrivent Financial for Lutherans State Tracking Number: 44065

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number:

Filing at a Glance

Company: Thrivent Financial for Lutherans

Product Name: Replacement Face Pgs SERFF Tr Num: THRV-126317653 State: Arkansas

FPDA/FPDAC

TOI: A02I Individual Annuities- Deferred Non- SERFF Status: Closed-Approved- State Tr Num: 44065

Variable Closed

Sub-TOI: A02I.002 Flexible Premium Co Tr Num: State Status: Approved-Closed

Filing Type: Form Reviewer(s): Linda Bird

Author: Karen Guyette Disposition Date: 11/16/2009

Date Submitted: 11/05/2009 Disposition Status: Approved-

Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

General Information

Project Name:

Project Number:

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Submission Type: New Submission

Status of Filing in Domicile:

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Overall Rate Impact: Group Market Type:

Filing Status Changed: 11/16/2009 Explanation for Other Group Market Type:

State Status Changed: 11/16/2009

Deemer Date: Created By: Karen Guyette

Submitted By: Karen Guyette Corresponding Filing Tracking Number:

Filing Description:

In order to comply with Arkansas Rule 97 Life Insurance And Annuities Replacement, we are submitting for your review and approval the following two forms.

Replacement Face Page, Form A-AF-FPDAR AR (10)

This replacement face page will be used with Flexible Premium Deferred Annuity Contract, form A-AF-FPDA (04), which was approved by your department on 10/09/2003 (State Tracking No. 24062).

SERFF Tracking Number: THRV-126317653 State: Arkansas
Filing Company: Thrivent Financial for Lutherans State Tracking Number: 44065

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number:

Replacement Face Page, Form A-CF-FPDACR AR (10)

This replacement face page will be used with Flexible Premium Deferred Annuity Contract, form A-CF-FPDAC (04), which was approved by your department on 10/09/2003 (State Tracking No. 24063).

The replacement face page will be used in place of the existing contract face page when the application for insurance indicates that a replacement is involved. The replacement face page contains the 30-day notice of right to return the contract.

Company and Contact

Filing Contact Information

Karen Guyette, Compliance Specialist II karen.guyette@Thrivent.com

625 Fourth Ave. South 800-847-4836 [Phone] 37251 [Ext]

Minneapolis, MN 55415 612-340-5040 [FAX]

Filing Company Information

Thrivent Financial for Lutherans CoCode: 56014 State of Domicile: Wisconsin 4321 North Ballard Road Group Code: 2938 Company Type: Fraternal

Appleton, WI 54919-0001 Group Name: State ID Number:

(800) 847-4836 ext. [Phone] FEIN Number: 39-0123480

Filing Fees

Fee Required? Yes
Fee Amount: \$40.00
Retaliatory? No

Fee Explanation: 2 forms X \$20 = \$40

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Thrivent Financial for Lutherans \$40.00 11/05/2009 31826987

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number:

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved- Closed	Linda Bird	11/16/2009	11/16/2009

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number: /

Disposition

Disposition Date: 11/16/2009

Implementation Date: Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number:

Schedule	Schedule Item	Schedule Item Status Public Access
Supporting Document	Flesch Certification	Yes
Supporting Document	Application	No
Supporting Document	Life & Annuity - Acturial Memo	No
Supporting Document	Statement of Variability	Yes
Form	Replacement Face Page	Yes
Form	Replacement Face Page	Yes

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number: /

Form Schedule

Lead Form Number: A-AF-FPDAR AR (10)

Schedule Item Status	Form Number	Form Type	e Form Name	Action	Action Specific Data	Readability	Attachment
	A-AF- FPDAR AF (10)	Other R	Replacement Face Page	Initial		51.000	Replacement Face Page A- AF-FPDAR AR (10).pdf
	A-CF- FPDACR AR (10)	Other	Replacement Face Page	Initial		51.000	Replacement Face Page A- CF-FPDACR AR (10).pdf

This certificate of membership and flexible premium deferred annuity is a legal contract between you and Thrivent Financial for Lutherans. We issue this contract based on the Application signed by the applicant(s) and the payment of the first premium.

We will pay you the Annuity Income beginning on the Annuity Date (see page 3) if all Annuitants are living on that date and this contract is in force. If an Annuitant dies after Annuity Income payments have begun, any amount payable will depend upon the terms of the settlement option elected. We will pay the Death Proceeds to the beneficiary if the death of the Annuitant, or the death of the first Annuitant to die if this contract has two Annuitants, occurs before the Annuity Date. The Annuity Income and Death Proceeds will be paid according to the provisions of this contract.

Right to Cancel. Please read this contract carefully. You may cancel the contract for any reason before midnight of the 30th day after you first receive it. Do this by (1) mailing or delivering written notice to our Service Center or to the representative through whom you bought it, and (2) returning the contract. Notice given by mail and return of the contract by mail are effective on being postmarked, properly addressed and postage prepaid. If you cancel the contract, it will be deemed void from the beginning. Within 10 days after we receive notice of cancellation and the returned contract, we will refund all premiums paid.

Flexible premium deferred annuity. Annuity Income payable at Annuity Date. Death Proceeds payable at death of Annuitant before Annuity Date. Annual dividends payable if earned.

Signed for the Society

ANNUITANT: [JOHN DOE] AGE: [35] SEX: [MALE]

[ANNUITANT: [JANE DOE] AGE: [35] SEX: [FEMALE]

CONTRACT NUMBER: [B1234567] DATE OF ISSUE: [JANUARY 1, 2010]

A-AF-FPDAR AR (10)

A Fraternal Benefit Society • Appleton, Wisconsin 54919-0001

This certificate of membership and flexible premium deferred annuity is a legal contract between you and Thrivent Financial for Lutherans. We issue this contract based on the Application signed by the applicant(s) and the payment of the first premium.

We will pay you the Annuity Income beginning on the Annuity Date (see page 3) if all Annuitants are living on that date and this contract is in force. If an Annuitant dies after Annuity Income payments have begun, any amount payable will depend upon the terms of the settlement option elected. We will pay the Death Proceeds to the beneficiary if the death of the Annuitant, or the death of the first Annuitant to die if this contract has two Annuitants, occurs before the Annuity Date. The Annuity Income and Death Proceeds will be paid according to the provisions of this contract.

The amount of any Full Surrender or Partial Surrender of accumulated value from Fixed Period Allocations may be increased or decreased by a Market Value Adjustment (see Section 9.2), except that no adjustment will be applied to surrenders made from a Fixed Period Allocation within 30 days before the end of its allocation period. Death Proceeds are not subject to a Market Value Adjustment.

Right to Cancel. Please read this contract carefully. You may cancel the contract for any reason before midnight of the 30th day after you first receive it. Do this by (1) mailing or delivering written notice to our Service Center or to the representative through whom you bought it, and (2) returning the contract. Notice given by mail and return of the contract by mail are effective on being postmarked, properly addressed and postage prepaid. If you cancel the contract, it will be deemed void from the beginning. Within 10 days after we receive notice of cancellation and the returned contract, we will refund all premiums paid.

Flexible premium deferred annuity.
Annuity Income payable at Annuity Date.
Death Proceeds payable at death of Annuitant before Annuity Date.
Fixed Period Allocations subject to Market Value Adjustment.
Annual dividends payable if earned.

Signed for the Society

Secretary

ANNUITANT: [JOHN DOE] AGE: [35] SEX: [MALE]

[ANNUITANT: [JANE DOE] AGE: [35] SEX: [FEMALE]

CONTRACT NUMBER: [B1234567] DATE OF ISSUE: [JANUARY 1, 2010]

A-CF-FPDACR AR (10)

SERFF Tracking Number: THRV-126317653 State: Arkansas
Filing Company: Thrivent Financial for Lutherans State Tracking Number: 44065

Company Tracking Number:

TOI: A021 Individual Annuities- Deferred Non- Sub-TOI: A021.002 Flexible Premium

Variable

Product Name: Replacement Face Pgs FPDA/FPDAC

Project Name/Number:

Supporting Document Schedules

Item Status: Status

Date:

Satisfied - Item: Flesch Certification

Comments:

Attachments:

AR FPDA Ctf of Compliance.pdf

AR FPDA Flesch Ctf.pdf

Item Status: Status

Date:

Bypassed - Item: Application

Bypass Reason: N/A - no policy being submitted at this time.

Comments:

Item Status: Status

Date:

Bypassed - Item: Life & Annuity - Acturial Memo

Bypass Reason: N/A - no policy being submitted at this time.

Comments:

Item Status: Status

Date:

Satisfied - Item: Statement of Variability

Comments: Attachment:

AR FPDA Statement of Variability.pdf

CERTIFICATION OF COMPLIANCE

FORM NUMBER	FORM TITLE
A-AF-FPDAR AR (10) A-CF-FPDACR AR (10)	Replacement Face Page Replacement Face Page
	mission meets the provisions of Rule and Regulation 19 as well the Arkansas Insurance Department.
Signature of Officer	
David J. Christianson Name (Typed or Printed)	
Director, Contract Forms and	Compliance
Title	
November 5, 2009	
Date	

ARKANSAS

Certification

I, David J. Christianson, an officer of Thrivent Financial for Lutherans, hereby certify that the following forms have the following readability scores as calculated by the Flesch Reading Ease Test and that these forms comply with the requirements of Arkansas Code Ann. 23-80-206.

Form	Flesch Score	
A-AF-FPDAR AR (10)	51	
A-CF-FPDACR AR (10)	51	

11/5/2009

Date

David J. Christianson
Director, Contract Forms and Compliance

STATEMENT OF VARIABILITY

Replacement Face Pages, Forms A-AF-FPDAR AR (10) and A-CF-FPDACR AR (10)

The following items have been bracketed to indicate that the information may be different in different replacement face pages or may be subject to change:

- Officers' signatures will change if new officers are elected
- Name of annuitant, age and sex are specific to each annuitant
- The name of the second annuitant, age, and sex will only appear if there is a joint annuitant
- Contract Number is different for each contract that we issue
- Date of Issue is the date the application is signed